

INDIVIDUAL PATIENT'S AUTHORIZATION

THIS FORM IS TO CONFIRM YOUR AUTHORIZATION TO USE OR DISCLOSE YOUR PROTECTED HEALTH INFORMATION FOR A SPECIAL PURPOSE.

PSYCHOTHERAPY NOTES: ☒ Check here if this authorization is for psychotherapy notes.

If this authorization is for psychotherapy notes, it may not authorize the use or disclosure of any other type of protected health information.

1. INDIVIDUAL PATIENT (OR PERSONAL REPRESENTATIVE) CONFIRMING THE AUTHORIZATION

I give my authorization to use or disclose my protected health information as described in Section 2 below.
I give this authorization voluntarily.

Individual Patient's Name: ROSEMARIE TAIMANGLO

Your Address: [REDACTED]

Your Address: [REDACTED]

Your Telephone Number: [REDACTED]

Your E-Mail Address: [REDACTED]

Your Patient Account Number: [REDACTED]

Your Social Security Number: [REDACTED]

2. THE USE AND/OR DISCLOSURE AUTHORIZED

Describe in detail the protected health information you are authorizing to be used and/or disclosed (If this authorization is for psychotherapy notes, no other type of protected health information may be listed here):

<see above>

Name the people and/or organizations (or the kinds of people and/or organizations) that you are authorizing to use and/or to disclose the protected health information described above.

Lilli Perez Iyechad, PhD, RPT-S

FAMILY PACIFIC

Reflection Center, Suite 102

222 Chalan Santo Papa, Hagatna 96910

Tel.: (671) 477-5715 ~ Fax: (671) 477-5714

Name the people and/or organizations (or the kinds of people and/or organizations) that you are authorizing to receive and use your protected health information.

prior authorization to release information to
Law Offices of Philip Torres & Thomas Roberts

EXHIBIT 6

INDIVIDUAL PATIENT'S AUTHORIZATION

Describe each purpose for which you are authorizing your protected health information to be used and/or disclosed.

to verify mental status

3. ENDING THIS AUTHORIZATION

Select one of the following two choices.

- ☒ This authorization will end on the following date: 07/05/07
- ☒ This authorization will end when the following event happens. The event must relate to the individual or the purpose of the authorized use and/or disclosure. Describe the event below:

Prior authorization given 03/01/07.

See attached

4. CHANGING YOUR MIND ABOUT THIS AUTHORIZATION

I understand that I may revoke this authorization at any time by giving written notice to the Privacy Officer at your office. However, I understand that I may not revoke this authorization for any actions taken before receipt of my written notice to revoke this authorization. In addition, I understand that if I am giving this authorization as a condition of obtaining insurance coverage, and I revoke this authorization, the insurance company has a right to contest my claims under the insurance policy.

5. SIGNING THIS AUTHORIZATION IS NOT A CONDITION OF TREATMENT

I understand that under most circumstances a healthcare provider may not condition treatment, payment, enrollment, or eligibility for benefits on my signing this authorization. However, I understand that signing an authorization that permits the use and/or disclosure of my protected health information for research purposes may be a condition of my treatment if I am undergoing research-related treatment. Also, I may be required to sign an authorization if my treatment is provided solely for the purpose of creating protected health information for disclosure to a third party. And under some circumstances, a health plan may condition my enrollment in a health plan or my eligibility for benefits on my providing an authorization permitting the health plan to make enrollment and eligibility determinations.

6. INDIVIDUAL PATIENT'S SIGNATURE

I have had the chance to read and think about the content of this authorization form and I agree with all statements made in this authorization. I understand that, by signing this form, I am confirming my authorization for use and/or disclosure of the protected health information described in this form with the people and/or organizations named in this form.

Signature: *Robert M. Smith* Date: 07/05/07

If this authorization form is signed by a personal representative for the individual patient:

Personal Representative's Name:

Print name

Signature

Relationship to Individual Patient:

YOU HAVE A RIGHT TO HAVE A COPY OF THIS FORM AFTER YOU SIGN IT.

J. Torres
2/2/2007

INDIVIDUAL PATIENT'S AUTHORIZATION

THIS FORM IS TO CONFIRM YOUR AUTHORIZATION TO USE OR DISCLOSE YOUR PROTECTED HEALTH INFORMATION FOR A SPECIAL PURPOSE.

PSYCHOTHERAPY NOTES: ☒ Check here if this authorization is for psychotherapy notes.

If this authorization is for psychotherapy notes, it may not authorize the use or disclosure of any other type of protected health information.

1. INDIVIDUAL PATIENT (OR PERSONAL REPRESENTATIVE) CONFIRMING THE AUTHORIZATION

I give my authorization to use or disclose my protected health information as described in Section 2 below.
I give this authorization voluntarily.

✓ Individual Patient's Name: VIVIANE VILLANUEVA

✓ Your Address: [REDACTED]

✓ Your Address: [REDACTED]

Your Telephone Number: [REDACTED]

Your E-Mail Address: _____

Your Patient Account Number: _____

Your Social Security Number: _____

2. THE USE AND/OR DISCLOSURE AUTHORIZED

Describe in detail the protected health information you are authorizing to be used and/or disclosed (if this authorization is for psychotherapy notes, no other type of protected health information may be listed here):

Name the people and/or organizations (or the kinds of people and/or organizations) that you are authorizing to use and/or to disclose the protected health information described above.

Tom V.C. Babauta, MSW, QCSW

FAMILY PACIFIC

Reflection Center, Suite 102

222 Chulavi Santa Papa, Hingston 96910

Tel.: (671) 477-5715 ~ Fax: (671) 477-5714

Name the people and/or organizations (or the kinds of people and/or organizations) that you are authorizing to receive and use your protected health information.

PRIOR AUTHORIZATION TO RELEASE INFORMATION TO LAW OFFICES
OF PHIL TORRES & THOMAS ROBERTS

EXHIBIT 7

INDIVIDUAL PATIENT'S AUTHORIZATION

Describe each purpose for which you are authorizing your protected health information to be used and/or disclosed.

TO VERIFY MENTAL STATUS

3. ENDING THIS AUTHORIZATION

Select one of the following two choices.

- ☒ This authorization will end on the following date: 07/25/07
- ☒ This authorization will end when the following event happens. The event must relate to the individual or the purpose of the authorized use and/or disclosure. Describe the event below:

4. CHANGING YOUR MIND ABOUT THIS AUTHORIZATION

I understand that I may revoke this authorization at any time by giving written notice to the Privacy Officer at your office. However, I understand that I may not revoke this authorization for any actions taken before receipt of my written notice to revoke this authorization. In addition, I understand that if I am giving this authorization as a condition of obtaining insurance coverage, and I revoke this authorization, the insurance company has a right to contest my claims under the insurance policy.

5. SIGNING THIS AUTHORIZATION IS NOT A CONDITION OF TREATMENT

I understand that under most circumstances a healthcare provider may not condition treatment, payment, enrollment, or eligibility for benefits on my signing this authorization. However, I understand that signing an authorization that permits the use and/or disclosure of my protected health information for research purposes may be a condition of my treatment if I am undergoing research-related treatment. Also, I may be required to sign an authorization if my treatment is provided solely for the purpose of creating protected health information for disclosure to a third party. And under some circumstances, a health plan may condition my enrollment in a health plan or my eligibility for benefits on my providing an authorization permitting the health plan to make enrollment and eligibility determinations.

6. INDIVIDUAL PATIENT'S SIGNATURE

I have had the chance to read and think about the content of this authorization form and I agree with all statements made in this authorization. I understand that, by signing this form, I am confirming my authorization for use and/or disclosure of the protected health information described in this form with the people and/or organizations named in this form.

Signature: V. Villanueva

Date: 7/25/07

If this authorization form is signed by a personal representative for the individual patient:

Personal Representative's Name: _____

Print name

Signature

Relationship to Individual Patient: _____

YOU HAVE A RIGHT TO HAVE A COPY OF THIS FORM AFTER YOU SIGN IT.

INDIVIDUAL PATIENT'S AUTHORIZATION

THIS FORM IS TO CONFIRM YOUR AUTHORIZATION TO USE OR DISCLOSE YOUR PROTECTED HEALTH INFORMATION FOR A SPECIAL PURPOSE.

PSYCHOTHERAPY NOTES: ☒ Check here if this authorization is for psychotherapy notes.

If this authorization is for psychotherapy notes, it may not authorize the use or disclosure of any other type of protected health information.

1. INDIVIDUAL PATIENT (OR PERSONAL REPRESENTATIVE) CONFIRMING THE AUTHORIZATION

I give my authorization to use or disclose my protected health information as described in Section 2 below.
I give this authorization voluntarily.

Individual Patient's Name: Jennifer T. Holbrook
Your Address: P.O. Box BE 315734 Tamuning GU 96991
Your Address: _____
Your Telephone Number: [REDACTED]
Your E-Mail Address: _____
Your Patient Account Number: _____
Your Social Security Number: _____

2. THE USE AND/OR DISCLOSURE AUTHORIZED

Describe in detail the protected health information you are authorizing to be used and/or disclosed (if this authorization is for psychotherapy notes, no other type of protected health information may be listed here):

Name the people and/or organizations (or the kinds of people and/or organizations) that you are authorizing to use and/or to disclose the protected health information described above.

Lili Perez Iyechad, PhD, RPT-S
FAMILY PACIFIC

Reflection Center, Suite 102
222 Chalan Santo Papa, Hagatna 96910
Tel: (671) 477-5715 ~ Fax: (671) 477-5714

Tom V.C. Babauta, MSW, QCSW
FAMILY PACIFIC

Reflection Center, Suite 102
222 Chalan Santo Papa, Hagatna 96910
Tel: (671) 477-5713 ~ Fax: (671) 477-5714

Name the people and/or organizations (or the kinds of people and/or organizations) that you are authorizing to receive and use your protected health information.

prior authorization to release information to Law office of
Phillip Torres & Thomas Roberts only.

EXHIBIT

8

INDIVIDUAL PATIENT'S AUTHORIZATION

Describe each purpose for which you are authorizing your protected health information to be used and/or disclosed.

to verify mental status

3. ENDING THIS AUTHORIZATION

Select one of the following two choices.

- ☒ This authorization will end on the following date: 7/24/07
- ☐ This authorization will end when the following event happens. The event must relate to the individual or the purpose of the authorized use and/or disclosure. Describe the event below:

4. CHANGING YOUR MIND ABOUT THIS AUTHORIZATION

I understand that I may revoke this authorization at any time by giving written notice to the Privacy Officer at your office. However, I understand that I may not revoke this authorization for any actions taken before receipt of my written notice to revoke this authorization. In addition, I understand that if I am giving this authorization as a condition of obtaining insurance coverage, and I revoke this authorization, the insurance company has a right to contest my claims under the insurance policy.

5. SIGNING THIS AUTHORIZATION IS NOT A CONDITION OF TREATMENT

I understand that under most circumstances a healthcare provider may not condition treatment, payment, enrollment, or eligibility for benefits on my signing this authorization. However, I understand that signing an authorization that permits the use and/or disclosure of my protected health information for research purposes may be a condition of my treatment if I am undergoing research-related treatment. Also, I may be required to sign an authorization if my treatment is provided solely for the purpose of creating protected health information for disclosure to a third party. And under some circumstances, a health plan may condition my enrollment in a health plan or my eligibility for benefits on my providing an authorization permitting the health plan to make enrollment and eligibility determinations.

6. INDIVIDUAL PATIENT'S SIGNATURE

I have had the chance to read and think about the content of this authorization form and I agree with all statements made in this authorization. I understand that, by signing this form, I am confirming my authorization for use and/or disclosure of the protected health information described in this form with the people and/or organizations named in this form.

Signature: [Signature]

Date: 7/24/07

If this authorization form is signed by a personal representative for the individual patient:

Personal Representative's Name: _____

Print name

Signature

Relationship to Individual Patient: _____

YOU HAVE A RIGHT TO HAVE A COPY OF THIS FORM AFTER YOU SIGN IT.

IN THE DISTRICT COURT OF GUAM

U.S. EQUAL EMPLOYMENT
OPPORTUNITY COMMISSION,

Plaintiff,

vs.

LEO PALACE RESORT,

Defendant.

JENNIFER HOLBROOK,
VIVIENE VILLANUEVA and
ROSEMARIE TAIMANGLO,

Plaintiff-Intervenors,

vs.

MDI GUAM CORPORATION dba LEO
PALACE RESORT MANENGGON HILLS
and DOES 1 through 10,

Defendants.

CASE NO. 1:06-CV-00028

DEPOSITION OF
JENNIFER HOLBROOK
SATURDAY,
MARCH 17, 2007

RECEIVED
APR 17 2007
11:30am

DOOLEY ROBERTS & FOWLER LLP

The deposition of Jennifer Holbrook, called by the Defendants, pursuant to Notice and pursuant to the Guam Rules of Civil Procedure, taken at the offices of Dooley Roberts & Fowler, LLP, Suite 201, Orlean Pacific Plaza, 865 South Marine Corps Drive, Tamuning, Guam 96913, on Saturday, March 17, 2007, at the hour of 7 o'clock a.m.

That at said time and place, there transpired the following:

Cecilia F. Flores
Freelance Stenotype Reporter
Tel: (671) 632-0727
Fax: (671) 632-5353
Email: chilangflores@hotmail.com

EXHIBIT

9

COPY

1 Q. Okay. Why did you go see Dr. Perez?

2 A. Because I was stressed.

3 Q. When did you first see Dr. Perez?

4 MS. MORRISON: Objection; vague.

5 MR. ROBERTS: Yeah.

6 Q. (By Mr. Roberts) When were you first counseled
7 by Dr. Perez with respect to the incident that occurred
8 at LeoPalace Resort?

9 A. I don't remember.

10 Q. Was it before you quit?

11 A. Yes, it was.

12 Q. Was it before you complained about sexual
13 harassment?

14 A. To who? To who?

15 Q. Yeah, good question. Was it before your
16 attorney sent this letter of August 16th?

17 A. No, it was after.

18 Q. What was Dr. Perez' advice with respect to your
19 work schedule in this letter? I mean, didn't Dr. Perez
20 recommend two weeks for you?

21 A. Yes.

22 Q. And why didn't you follow your therapist's
23 advice?

24 A. I couldn't afford it.

25 Q. How many times were you counseled by Dr. Perez?

1 A. I don't remember.

2 Q. Was it more than one?

3 A. Yes.

4 Q. Was it more than two?

5 A. Yes.

6 Q. More than three?

7 A. Uh, I don't remember.

8 Q. When is the last time you were counseled by Dr.
9 Perez?

10 A. I don't remember.

11 MR. ROBERTS: I've said this before but
12 I'll reiterate. I requested Dr. Perez' records in
13 discovery back on January 31st in a request for
14 production of documents, and I sent a HIPPA waiver form,
15 but I have not received these documents yet. And I have
16 to reserve my right to take your deposition again if my
17 -- the absence of those records here today has
18 prejudiced my ability to take your deposition in any
19 way.

20 Having said --

21 MR. TORRES: My response. I have
22 forwarded the HIPPA request and I have requested the
23 records and I have forwarded to you everything I have
24 received from Dr. Perez. I have yet to receive
25 responses from them.

1 MR. ROBERTS: I understand.

2 Q. (By Mr. Roberts) Did Dr. Perez charge you?

3 A. A fee?

4 Q. Yes.

5 A. Yes.

6 Q. Do you remember what it cost per session?

7 A. No.

8 Q. Did you pay it?

9 A. Yes.

10 Q. Did she ever come to a diagnosis of what was
11 bothering you, to your knowledge?

12 A. Yes.

13 Q. And what was her diagnosis?

14 A. Post-traumatic stress.

15 Q. Post-traumatic stress. Do you remember those
16 words exactly?

17 A. I was told that.

18 Q. Those three words, post-traumatic stress?

19 A. It was an abbreviation, P -- I don't --

20 Q. Was it PTSD?

21 A. Probably.

22 Q. Post-traumatic stress disorder; have you heard
23 those words?

24 A. I don't remember.

25 Q. Do you remember if she used the words acute

1 stress disorder?

2 A. No.

3 Q. Post-traumatic stress are the words you
4 remember, right?

5 A. Yes.

6 Q. The records will say what they say.

7 A. Yes.

8 Q. Why did you stop seeing -- I've asked you this?
9 Why did you stop seeing Dr. Perez?

10 A. I believe our sessions -- we worked on dealing
11 with the issues and she helped me through many sessions,
12 or the sessions that I went through, understand how to
13 cope with this.

14 Q. Did she prescribe any medication?

15 A. No.

16 Q. And did you, as a result of your sessions with
17 Dr. Perez, come to be able to cope with the stress that
18 you were feeling?

19 A. Yes.

20 Q. After you resigned from LeoPalace, did you get
21 another job?

22 A. Yes.

23 Q. When?

24 A. I don't remember.

25 Q. Did you finish your degree first, which you got

1 unfriendly environment. It's like we couldn't talk to
2 anybody anymore. It wasn't the same anymore, it was
3 just so unhappy being there from my perspective.

4 Q. Can I have that exhibit back, please? Well,
5 you were still able to talk with Mr. Suzuki, right?

6 A. I did, I spoke to him. I continued doing my
7 job. If I had to communicate with my supervisor, he was
8 the one I communicated with.

9 Q. Yeah, you went to him and said, "Hey, what's up
10 with these hours," right?

11 A. I asked him about my hours.

12 Q. And he wasn't rude to you, was he?

13 A. No, I don't think so.

14 Q. Can you look at Exhibit 16, I believe -- no,
15 15. You haven't seen this document, but this was given
16 to me by the EEOC and there's an EEOC Bates stamp that's
17 partially cut off, it's marked as Exhibit 15. Mr.
18 Griffin reported -- this is a report by Mr. Griffin
19 after his conversation with you on or about April 5th of
20 2005. Mr. Griffin wrote after Christine Camacho was
21 discharged, you told him that you retained legal counsel
22 and were advised to go see a therapist because of their
23 ordeal with sexual harassment. Did you tell Mr. Griffin
24 that?

25 A. I don't remember.

1 Q. Do you remember, were you advised to go seek a
2 therapist?

3 A. Does that breach patient --

4 Q. No, it doesn't breach doctor-patient privilege
5 but it may breach another privilege.

6 A. I believe -- yes, I believe so, that it was a
7 recommendation to seek -- to see a therapist about our
8 stress.

9 Q. By whom?

10 A. By Phil.

11 Q. I know you've testified today that you were
12 sexually harassed on the workplace. I want to ask you,
13 do you feel like -- new subject -- do you feel that you
14 were discriminated against in any way by LeoPalace
15 Resort?

16 A. Explain discrimination.

17 Q. Do you think you were treated differently --
18 before August 16th, before Phil wrote his letter, your
19 sexual harassment complaint, do you feel like management
20 treated you differently than other employees?

21 A. Before August 16th, was I treated differently?

22 Q. Yes. I'll just ask you a direct question;
23 okay?

24 A. Okay.

25 Q. Do you feel like you were treated differently

1 anymore with Mr. Maruyama. Or that Mr. Suzuki and
2 everybody felt like we were the bad guys and they
3 weren't talking to us anymore.

4 MR. ROBERTS: Objection; the witness is
5 speculating as to what other people's feelings were.

6 A. Okay; sorry.

7 MR. ROBERTS: You don't have to say
8 you're sorry. You can answer the question now that I've
9 objected to it.

10 A. You know, I -- they didn't -- why? I felt I
11 was doing my job and I continued going to work during
12 those times even though we were short of staff. I --
13 yeah, I really believed that everything was going to be
14 better. I did my job, I provided excellent customer
15 service and yet I got treated a lot differently, like no
16 -- basically, it wasn't the same anymore.

17 Q. (By Mr. Torres) When you went to see the
18 psychiatrist, you testified that you went on my
19 recommendation.

20 A. Yes.

21 Q. How long have I known you?

22 A. A few years.

23 Q. And you came to see me as an attorney?

24 A. Friend attorney; yes.

25 Q. So we have both kinds of relationships?

1 A. Yes.

2 Q. And did you -- in your mind, was I making that
3 recommendation to go see a psychiatrist as your friend
4 or as your lawyer?

5 A. A friend.

6 Q. And that psychiatrist recommended that you take
7 two weeks off?

8 A. Yes.

9 Q. And you didn't do that?

10 A. No.

11 Q. Why?

12 A. Because I couldn't afford to take two weeks off
13 and not be paid for it.

14 Q. But everybody has bills; what do you mean you
15 can't afford it?

16 A. I had no other source of income. I had to take
17 care of myself, my son -- you know, pay for my personal
18 loans at the time.

19 Q. Who's your son; how old is your son?

20 A. He is four years old.

21 Q. You were shown various declarations, Exhibits
22 13, 14, 15 -- or 13 and 14.

23 A. Okay.

24 Q. 13 is called a Supplemental Declaration. Did
25 you know what this was specifically addressing?

IN THE DISTRICT COURT OF GUAM

U.S. EQUAL EMPLOYMENT
OPPORTUNITY COMMISSION,

Plaintiff,

vs.

LEO PALACE RESORT,

Defendant.

JENNIFER HOLBROOK,
VIVIENE VILLANUEVA and
ROSEMARIE TAIMANGLO,

Plaintiff-Intervenors,

vs.

MDI GUAM CORPORATION dba LEO
PALACE RESORT MANENGON HILLS
and DOES 1 through 10,

Defendants.

CASE NO. 1:06-CV-00028

 **COPY**

DEPOSITION OF ROSEMARIE TAIMANGLO

Taken on Behalf of the Defendant

BE IT REMEMBERED That, pursuant to
the Guam Rules of Civil Procedure, the deposition of
Rosemarie Taimanglo was taken before Veronica F. Reilly,
Certified Shorthand Reporter, on Tuesday, the 20th day of
March 2007, at 9:00 a.m. in the Law Offices of Dooley Roberts
& Fowler, 865 South Marine Corps Drive, Suite 201, Orlean
Pacific Plaza, Tamuning, Guam.

Veronica F. Reilly, CSR-RPR
Certified Shorthand Reporter
Tel: 671.734.1041 * Fax: 671.734.1045
E-mail: veronica.reilly@hotmail.com

**DISK
ENCLOSED**

1 Actually, August 19 I guess it was?

2 A. (No response.)

3 MR. ROBERTS: This will be 15.

4 (Exhibit 15 marked.)

5 BY MR. ROBERTS: (Continuing)

6 Q. This is a letter that your lawyer delivered to Leo
7 Palace and it appears to be regarding you from your
8 counselor, Lilli Perez Iyechad. Did you ever see this
9 letter?

10 A. Yes.

11 Q. Did you take two weeks off?

12 A. Yes.

13 Q. And that's what Lilli recommended you do?

14 A. Yes.

15 Q. When did you come back to work?

16 A. September 2.

17 Q. And did you work a regular schedule between
18 September 2nd and the end of October when you left the
19 company?

20 A. Yes, I work the morning shift; yes.

21 Q. On a regular basis?

22 A. Yes.

23 Q. Can you remember any incidents or conversations
24 specifically related to Mr. Mariyama that happened between
25 September 4 when you came back to work and the end of August,

1 before you wrote your October 11th resignation letter?

2 A. Yes.

3 Q. How long before October 11, if you can recall?

4 A. I think after I accepted the job off at Wells Fargo.
5 I don't know how many days after. I know it's just days but
6 I don't remember the date.

7 Q. Are you saying like a few days before October 11th,
8 you had accepted the job with Wells Fargo?

9 A. Yes.

10 Q. When did you decide to leave your job at Leo Palace?

11 A. Ending of -- maybe -- when I decided, I decided
12 maybe ending of September.

13 Q. Did Lilli Perez ever tell you, you ought to get out
14 of that company?

15 A. I'm sorry?

16 Q. You know who Dr. Lilli Perez is, right?

17 A. Yes.

18 Q. We'll talk about her in a minute. Did she ever tell
19 you, you ought to leave Leo Palace?

20 A. I don't remember.

21 Q. Why did you go see Lilli Perez for treatment?

22 A. Jennifer actually told me that I should go see
23 Dr. Lilli and also Jennifer had spoke to Mr. Suzuki about it
24 to -- if we can have the same day off so she can take me to a
25 therapist and Mr. Suzuki agreed because I was always crying

1 at work, so I went to see Dr. Lilli.

2 Q. When you say, I was always crying at work, are you
3 talking about the few-day period between the time that
4 Mariyama-san got your sexual harassment complaint and when
5 you started taking time off, your two weeks off earlier?

6 A. (No response.)

7 Q. Just to get the dates right, Jennifer Holbrook
8 testified that the letter, Phil Torres's letter, is dated the
9 16th, but Mariyama and her first talked about it, she said he
10 raised his voice to her the next day on August 17th. Do you
11 recall that?

12 A. I don't remember the date.

13 Q. Okay. And then I've got a letter here, Exhibit 15,
14 from Lilli Perez to Mr. Suzuki dated August 19 recommending
15 that you be given a two-week leave of absence starting August
16 19. Do you see that?

17 A. Yes.

18 Q. So when you just said I was always crying at the
19 office, are you talking about generally the time period
20 August 17 and 18 before you took your two weeks off?

21 A. Before.

22 Q. When did Jennifer tell you you should go see
23 Dr. Perez?

24 A. Before the 19th. It's probably between this date
25 and that date.

1 Q. Okay. That's what I'm asking?

2 A. On August 16 --

3 Q. Between the 16th and the 19th?

4 A. Yes, sir.

5 Q. Is probably when Jennifer said you ought to go see
6 Lilli Perez Iyechad?

7 A. Yes.

8 Q. Did you see Dr. - am I pronouncing that right -
9 Iyechad?

10 A. I don't know how to pronounce her name.

11 Q. You call her Dr. Lilli I'll bet, right?

12 A. Yeah.

13 Q. All right. Let's call her Dr. Lilli then. When's
14 the first time you saw Dr. Lilli?

15 A. August 19.

16 Q. And did you undergo any kind of counseling or
17 therapy that day with Dr. Lilli?

18 A. She -- yes, she tried to talk to me about what
19 happened to me, but in that session, I was crying again.

20 Q. Well, let me ask to get you away from that, Rose.
21 How many times did you see Dr. Lilli?

22 A. Twice.

23 Q. And that would have been both times in August of
24 2004?

25 A. Once in August 2004.

1 Q. And when was the next time you saw her?

2 A. Last week.

3 Q. Why did you go see her last week?

4 A. Because with my attorneys interviewing me, I was
5 still crying after more than two years after what has
6 happened to me.

7 Q. Have you ever cried on the job at Alupang Beach
8 Tower?

9 A. Not at work, sir.

10 Q. Was Dr. Lilli able to make any sort of -- did she
11 tell you what was wrong with you on the first meeting in
12 August of 2004?

13 A. No. She only called my doctor to prescribe me a
14 medicine.

15 Q. Do you remember the name of the medicine?

16 A. It's spelled.

17 Q. Does it have two X's in it?

18 A. Yes.

19 Q. It's Xanax, right?

20 A. Yes.

21 Q. That's an anti -- - Dr. Roberts speaking here - it's
22 an anxiety pill?

23 A. I don't know.

24 Q. Did you fill the prescription?

25 A. I'm sorry?

1 Q. Did you go to a pharmacy and fill the prescription?

2 A. (No response.)

3 Q. Did you get the pills?

4 A. Yes.

5 Q. And did it help?

6 A. Yes, it did.

7 Q. Are you still taking Xanax today?

8 A. No, sir.

9 Q. By the way, today as we speak, are you on any
10 medication?

11 A. My high blood pill.

12 Q. Anything else?

13 A. Medication? Birth control, sir.

14 Q. I was going to say -- Sorry.

15 A. That's medication, right?

16 Q. I was going to ask you, are you on any medication
17 that could interfere with your ability to remember things
18 that happened two and a half years ago. And your answer
19 would be no, right?

20 A. I'm sorry?

21 Q. You're not taking any medication as we talk today
22 that would interfere with your ability to remember or testify
23 truthfully, right?

24 A. No, sir.

25 Q. How many pills were in your first prescription, if

1 you can remember, or if it's easier for you, how many weeks
2 or months did you take Xanax?

3 A. I stopped in November that same year, 2004. I
4 didn't take it everyday, only when I felt like I'm emotional,
5 depressed.

6 Q. After November of 2004, forgetting about last week's
7 appointment with Dr. Lilli, after November of 2004, did you
8 ever see any other counselor or health care specialist as a
9 result of what happened at Leo Palace?

10 A. You mean therapist?

11 Q. Therapist, for example. Other than the first visit
12 with Lilli Perez, did you ever see a therapist again?

13 A. Until this day?

14 Q. Until last week.

15 A. Last week, no, sir.

16 Q. And have you ever seen any physician for any
17 medical condition that happened to you as a result of what
18 happened at Leo Palace, other than Dr. Lilli?

19 A. I've gone to the doctor for -- I've been sick.

20 Q. But that's not because of Leo Palace, right?

21 A. No. I had colds.

22 Q. You had the sniffles, the flu?

23 A. (Witness nodded head.)

24 Q. You were emotionally upset over what happened to you
25 at Leo Palace, right?

1 A. Stressed. Emotionally stressed; yes.

2 Q. And then so you went to see Dr. Lilli on one time?

3 A. In August.

4 Q. And did you ever see any other counselor or doctor
5 because you were stressed?

6 A. No.

7 Q. And did you ever see any other doctor or health
8 care professional, I already asked this, for anything wrong
9 with your body, physically wrong with your body as a result
10 of what happened at Leo Palace?

11 A. No.

12 Q. Did Dr. Lilli say anything to you about your
13 condition in this first meeting with her?

14 A. I don't remember what she said to me.

15 Q. Let me ask you just a preliminary question. Did you
16 take any Xanax at any time during December of 2004 while you
17 were working at Wells Fargo?

18 A. No.

19 Q. After you left your Wells Fargo job and before you
20 took your job with Alupang Beach Tower, were you willing to
21 come back to work at Leo Palace?

22 A. There was a time that I wanted to work for Leo
23 Palace, yes.

24 Q. Thank you. Jennifer Holbrook testified that Leo
25 Palace reduced her hours in retaliation for her complaint

1 Q. And you took that to mean that you needed to go to
2 Mr. Suzuki in the future before you could go to Human
3 Resources?

4 A. Yes, and that's what I did also on June 2004.

5 Q. Okay. Earlier, Mr. Roberts also asked you about
6 whether sexually harassing physical incidents occurred with
7 Christina everyday and you responded no, but did you
8 experience other, like verbal, sexually harassing comments or
9 vulgar language from Christina everyday?

10 A. Yes, that was daily.

11 Q. And what sort of things did you experience daily?

12 A. She would say -- ask us about if we like to be eaten
13 or she'll discuss her sexual things that she does with her
14 girlfriend.

15 Q. Anything else that you can remember?

16 A. She would talk to Jennifer about sexual things and
17 Jennifer just ignores her or walks away.

18 Q. Are you still under the care of Dr. Lilli?

19 A. Yes. I have an appointment tomorrow.

20 MS. MORRISON: I don't have any further
21 questions.

22 MR. TORRES: I have no questions.

23 REDIRECT EXAMINATION

24 BY MR. ROBERTS:

25 Q. Are you saying that Christine Camacho, every single

IN THE DISTRICT COURT OF GUAM

U.S. EQUAL EMPLOYMENT
OPPORTUNITY COMMISSION,

Plaintiff,

vs.

LEO PALACE RESORT,

Defendant.

JENNIFER HOLBROOK,
VIVIENE VILLANUEVA and
ROSEMARIE TAIMANGLO,

Plaintiff-Intervenors,

vs.

MDI GUAM CORPORATION dba LEO
PALACE RESORT MANENGGON HILLS
and DOES 1 through 10,

Defendants.

CASE NO. 1:06-CV-00028

COPY

FILED

APR 25 2007
4:17 PM
DOOLEY ROBERTS & FOWLER LLP

DEPOSITION OF VIVIENE VILLANUEVA

Taken on Behalf of the Defendant

BE IT REMEMBERED That, pursuant to the Guam Rules of Civil Procedure, the deposition of Vivienne Villanueva was taken before Veronica F. Reilly, Certified Shorthand Reporter, on Wednesday, the 21st day of March 2007, at 1:30 p.m. in the Law Offices of Dooley Roberts & Fowler, 865 South Marine Corps Drive, Suite 201, Orlean Pacific Plaza, Tamuning, Guam.

Veronica F. Reilly, CSR-RPR
Certified Shorthand Reporter

Tel: 671.734.1041 * Fax: 671.734.1045

E-mail: veronica_reilly@hotmail.com

**DISK
ENCLOSED**

1 Q. Do you want to come with us?

2 A. Yes. And I wanted to inform them of what happened.

3 Q. And you said, yeah, I'll go?

4 A. Yes. But I was already there.

5 Q. Say that again?

6 A. I left early because I got scared, then I went
7 straight to her.

8 Q. To Rose's house?

9 A. Yes.

10 Q. And then you left with Rose to go see Phil?

11 A. Yes.

12 Q. When's the next time you went back to work after
13 August 13th?

14 A. I'm not sure.

15 Q. At some point, did you see a counselor who
16 recommended two weeks off?

17 A. Yes.

18 Q. This will be Exhibit 9.

19 (Exhibit 9 marked.)

20 BY MR. ROBERTS: (Continuing)

21 Q. Do you know who Tom Babauta is?

22 A. Yes. He was the therapist I saw but he's not a
23 doctor. He's a --

24 Q. Counselor?

25 A. Counselor.

1 Q. When did you first see Mr. Babauta?

2 A. August 19.

3 Q. And he recommended two weeks off for you, right?

4 A. Correct.

5 Q. Did you take two weeks off?

6 A. Yes, I did.

7 Q. How many times did you see Mr. Babauta for
8 treatment?

9 A. Twice.

10 Q. Did he ever tell you what he thought was wrong with
11 you?

12 A. All I could remember that he's saying that I had
13 anxiety and stress.

14 Q. Is Mr. Babauta able to prescribe medicine, to the
15 best your knowledge?

16 A. I don't know.

17 Q. Did he send you to another doctor?

18 A. No.

19 Q. Did he prescribe any medication for you?

20 A. No, he did not.

21 Q. Did any other doctor prescribe medication for you?

22 A. No.

23 Q. Did you ever see Dr. Libao?

24 A. Who?

25 Q. Okay. So you never had any prescription medication

1 choice?

2 ~ A. Well, I thought -- I mean, I had a choice and I
3 didn't want but it was like making a hard decision.

4 Q. And you chose to quit?

5 A. I chose to quit.

6 Q. And was that a voluntary decision?

7 A. Yes.

8 Q. You thought about it and you made a voluntary
9 decision to resign your job at Leo Palace; is that correct?

10 A. Yes.

11 Q. What were the reasons you decided to go see a
12 counselor?

13 A. Right after Christina was harassing -- at least on
14 the 11th and specially on the day that she was fired, I felt
15 that some day that she was going to retaliate because of us.
16 And so everyday that I go to work and which is mostly morning
17 shift, and me, I'm the person that would go to work even like
18 more than thirty minutes even though it's closed. And
19 everyday, when I'll drive, I will be like looking around, is
20 she there, is she anywhere near me, is she around or is
21 anyone in particular, like because she had friends, you know,
22 someone that I don't know, so I have to be watchful.

23 Q. Do you think Leo Palace should have -- Let me ask it
24 this way: What do you think Leo Palace should have done, if
25 anything, after it fired Christine Camacho?

1 Q. Do you know what Palacios did that day with respect
2 to Christine Camacho?

3 A. I think they investigated.

4 Q. Do you think they escorted her physically off the
5 Leo Palace premises?

6 A. I don't know.

7 Q. You don't know?

8 A. I don't know.

9 Q. Did you ever see Christine Camacho on Leo Palace
10 premises after that day?

11 A. After that day? No.

12 Q. What feelings or emotions or other -- feelings or
13 emotions were you experiencing when you decided to go see a
14 counselor?

15 A. I was having stress, headaches, I couldn't go to
16 sleep, and when I go to sleep, I wake up early morning and
17 cannot go back to sleep again and just cannot think anymore,
18 like cannot concentrate on my work job.

19 Q. So you saw Tom Babauta how many times?

20 A. Two times.

21 Q. Once on August 19, 2004, the first day?

22 A. Yes.

23 Q. You had an appointment for September 30 of 2004,
24 too, but you cancelled it, right?

25 A. Yes, due to car problems.

1 Q. Due to car problems?

2 A. Yes, my car overheating.

3 Q. And then you had another session on October 5 of
4 2004?

5 A. Yes, that was the second one.

6 Q. Have you ever seen Mr. Babauta again for treatment?

7 A. No.

8 Q. Have you ever seen any other counselor for treatment
9 after that October 5, 2004?

10 A. I'm not sure if -- I'm sorry?

11 Q. Yeah, is October 5, 2004 the last time you sought
12 counseling --

13 A. Yes.

14 Q. -- in connection with the Leo Palace incidents?

15 A. Yes.

16 Q. Did it help? The counseling?

17 A. Yes.

18 Q. Did your headaches go away?

19 A. (Witness nodded head.) A little bit.

20 Q. After your counseling, did your sleeping patterns
21 improve?

22 A. It mellowed down.

23 Q. Did your stress level get better?

24 A. It improved a little bit, slowly but it didn't
25 actually like over the night; like slowly, gradually.

1 Q. I understand that you were probably stressed about
2 these depositions that were coming up, right?

3 A. Yes.

4 Q. Before you were told about these depositions, how
5 were you doing in terms of your emotional condition as a
6 result of these incidents at Leo Palace?

7 A. I was doing okay. I mean, I moved on.

8 Q. Answer this question if you can. At what point or
9 at some point after your Leo Palace job, did you feel like
10 I'm over it?

11 A. No, I still had.

12 Q. What?

13 A. I was still bothered.

14 Q. In what way?

15 A. Knowing that Christina is still there and if she was
16 going to strike out of the blue.

17 Q. Well, today, are you over it?

18 A. I'm over it.

19 Q. How long do you think you suffered stress as a
20 result of the incidents at Leo Palace?

21 A. After I resigned?

22 Q. Yeah, for how many weeks or months did you continue
23 to suffer from stress or anxiety or sleeplessness or any of
24 these symptoms you talked about?

25 A. I was slowly getting better after three months -

1 about, I'm not sure - and then just slowly.

2 Q. You said I was slowly getting better after about
3 three months?

4 A. After about three months, I noticed that I was like
5 healing and not think about what just had happened in the
6 past but there were still some but not that much.

7 Q. Did you ever miss any time at work with your
8 Marriott job because of what happened at Leo Palace?

9 A. Yes, while I was sick.

10 Q. No, because of what happened?

11 A. Oh, I'm sorry. Leo Palace?

12 Q. Yeah, because of what you went through at Leo
13 Palace, did you ever miss any time at work at the Marriott?

14 A. Not in regard to Leo Palace. I was just sick. You
15 know, cough, colds.

16 Q. By the time you started working at Marriott, were
17 you over most of your problems from the Leo Palace?

18 A. From when I started?

19 Q. (Nodded head.)

20 A. Not really. I mean --

21 Q. How about a month or two into your job at the
22 Marriott, were you over most your problems from Leo Palace?

23 A. I would say about three months that I had started to
24 not think about it anymore.

25 MR. ROBERTS: That's all I have. Thank you for